



County of San Diego

HEALTH AND HUMAN SERVICES AGENCY

PUBLIC HEALTH SERVICES HEALTH SERVICES COMPLEX

3851 ROSECRANS, SAN DIEGO, CALIFORNIA 92110
(619) 531-5800 FAX (619) 542-4186

NICK MACCHIONE, FACHE
DIRECTOR

WILMA J. WOOTEN, M.D., M.P.H.
PUBLIC HEALTH OFFICER

Epidemiology & Immunization Services
Emergency & Disaster Medical Services
HIV, STD and Hepatitis
Maternal, Child and Family Health Services
Public Health Laboratory
PH Nursing
Border Health
TB Control & Refugee Health
Vital Records

Base Station Physicians' Committee
Jamil Madati, M.D., Chairperson
c/o Emergency Medical Services
6255 Mission Gorge Road
San Diego, CA 92120
(619) 285-6429 Fax: (619) 285-6531

BASE STATION PHYSICIANS' COMMITTEE MEETING MINUTES Tuesday, May 15, 2012

Members Present

Dunford, M.D., Jim – City of S.D. Medical Director
Friedberg, M.D., Bruce – Palomar for Dr. Grad.
Haynes, M.D., Bruce – County EMS Medical Director
Kramer, M.D., Mark – Sharp Memorial BHMD
Linnik, M.D., Bill – Sharp BHMD
Madati, M.D., Jamil – Children's Hospital ED MD
Meadows-Pitt, R.N., Mary – Sharp Grossmont BHNC
Miller, M.D., Alexander - NMCSO
Schwartz, M.D., Brad – AMR/RCCP Medical Director
Tomaneng, M.D., Neil – Tri-City BHMD
Wang, M.D., Marcus – Scripps Mercy BHMD

County Staff

Smith, R.N., Susan
Stepanski, Barbara

Recorder

Wolchko, Janet I.

In Attendance

Allington, R.N., Linda – Carlsbad Fire
Anderson, R.N., Marilyn – Vista Fire
Bourdon, R.N., Darlene – Scripps Mercy
Broyles, R.N., Linda – AMR/RCCP
Cavanaugh, Mary – Miramar Fire
Conover, William – Camp Pendleton Fire
Curnow, Robert – Mercy Air
Davis, M.D., Dan – Mercy Air
DeMers, Gerard - UCSD
Dotson, R.N., Melody - UCSD
Duffy, Jennifer – Escondido/San Marcos
Graydon, R.N., Cheryl – Palomar BHNC
Howard, R.N., LuAnn – Scripps La Jolla
Kahn, Chris – UCSD
Klingensmith, Todd – S.D. Paramedic Assoc.
Lemire, Harold – S.D. Fire Department
Monday, John – Camp Pendleton Fire
Murphy, R.N., Mary – CSA-17 Fire
Ochs, R.N., Ginger – S.D. Fire Department
Rosenberg, R.N., Linda – Sharp Memorial BHNC
Rosenberger, R.N., Wendy – Tri-City Medical Ctr.
Russo, R.N., Joe – Rural Metro/CSA-17
Seabloom, R.N., Lynne – Oceanside Fire
Serra, M.D., John - UCSD
Vilke, M.D., Gary – Beacon/ROC
Wells, R.N., Chris – Scripps La Jolla

I. CALL TO ORDER/INTRODUCTIONS/ANNOUNCEMENTS

Jamil Madati, M.D. called the meeting to order at 11:02 am. Attendees introduced themselves.

II. APPROVAL OF MINUTES

A motion was made by Dr. Tomeneng to approve the minutes of April 17, 2012. Motion carried.

III. MEDICAL DIRECTOR'S REPORT (Bruce Haynes, M.D.)

- A. The number of patients that bypassed the requested hospital was down. Hospital bypass numbers were also down compared to last month. If there appears to be a prolonged off load delay or if there are multiple units waiting, speak to the charge nurse. The EMS duty officer may be notified for assistance when prolonged off loads occur, especially if multiple units are involved. Please do not call the Duty Officer if you have left the scene or have not attempted to talk to hospital staff.
- B. The Golden Guardian 2012 exercise is on May 15-17, 2012. The scenario is a 7.0 earthquake on the San Andreas Fault. There will be a communications exercise on May 15, and on May 16 the Emergency Operations Centers (EOC's) will be activated with hospitals and agencies participating in the exercise.
- C. May 1, 2012 was the "*Strike Out Stroke Day*" event at PETCO Park. Hospitals participated in the event distributing information on the signs and symptoms of stroke, and the risk factors. Blood pressure checks and other evaluations were given by the stroke hospitals at the park entry gate prior to the game. Education on the warning signs of stroke was taught through the FAST acronym: **F**ace-uneven smile, **F**acial droop/numbness, **V**ision disturbance; **A**rm and **L**eg-weakness, numbness, difficulty walking; **S**peech-slurred, inappropriate words, mute; **T**ime-time is critical, call 911.
- D. It is an off year for protocol changes. There are a few minor changes that will be reviewed. Versed dose and contact criteria regarding patients who are intoxicated may be revised. There may be a focus on the increasing number of patients with left ventricular assist devices.

Policy S-414, the Do-Not-Resuscitate (DNR) policy will clarify the Advance Health Care Decision law. Policy S-422, the Restraint policy adds information on patients who are spitting at rescuers and patient positioning and restraint of extremities.
- E. The iQCS system should be ready by this summer. Training will be given beforehand.
- F. The state has issued draft regulations for EMS for Children. Proposed paramedic regulations are out for comment, with some technical changes.

- G. Trauma center verification visits are completed. The hospital trauma centers were prepared and the American College of Surgeon (ACS) verification visits went well.
- H. There are drug shortages with morphine carpjects that will be on back order until June. The Midazolam shortage seems to be resolved. There was a reported shortage of bicarbonate in prefills.

The group discussed drug procurement and the sources of the shortage. There will be continued updates brought to the BSPPC meetings for feedback.

IV. SAN DIEGO HEALTHCARE DISASTER COUNCIL (Linda Rosenberg, R.N.)

SDHDC is concentrating on the Golden Guardian exercise and drill activation. The Medical Operations Center (MOC) and Office of Emergency Services (OES) will be open. You can log onto WebEOC for real time information on the drill.

V. BEACON UPDATE (Gary Vilke, M.D.)

- Beacon is working with the County on computer contract updates.
- Beacon met with San Diego Fire regarding EKG and CAD transmittals.
- Dr. Dunford added that with Beacon there will also be the ability to prealert the emergency room on patients that are identified as having case management plans, such as Project 25 superusers. The goal is to have the ability for the fire fighters who are first at the scene to enter patient information and to identify the person and alert their case manager and the ER.
- The Health Information Exchange (HIE) is a community exchange working with 211 and major providers to create a location where case files can reside, i.e. end of care documents and POLST registry files.

VI. ROC (Gary Vilke, M.D.)

- The Biomarker Lactate Assessment of Shock in Trauma (BLAST) observational study currently has a total of 14 patients.
- Dr. Vilke attended the ROC Semi-annual meeting in Toronto where issues with the Amiodarone, Lidocaine, Placebo Study (ALPS) study is being resolved. Next month they will enroll patients in the study and conduct training.

VII. TREATMENT PROTOCOL REVIEW (Susan Smith, R.N.)

The following Treatment Protocols were discussed:

S-102, Abbreviation List – Total Artificial Heart (TAH) and Ventricular Assist Device (VAC) was added to the list.

S-103, BLS/ALS Ambulance Inventory – par levels for Atropine 1mg/10ml changed from three to two.

S-127, Dysrhythmias – At the last meeting there was discussion regarding performing compressions on VAD or TAH patients. Compressions should not be performed on VAD or TAH patients unless instructed otherwise by the VAD coordinator or the base hospital.

S-135, Pre-existing Medical Interventions – Add the statement, bring backup equipment/batteries as appropriate to cover the VAD.

S-138, Shock – Non-traumatic was added to the statement under hypervolemic.

S-142, Psychiatric/Behavioral Emergencies Changes were made with regards to administering Versed for severe agitation and behavioral emergencies at the site. This is different than the poisoning protocol overdose which covers agitated delirium. Versed was changed from a maximum of 10 mg Intramuscular (IM) to maximum of 5 mg IM on Standing Order (SO) unless suspected intoxication, then it is a Base Hospital Order (BHO). The dose may be repeated with BHO.

The main changes to the protocol was to reduce the 10 mg to 5 mg IM and going from SO to BHO for the repeat dose. The changes will be made to the protocol and if necessary they will be reevaluated next year.

S-136, Respiratory Distress – Epinephrine IM wording changes were made with severe respiratory distress/failure or inadequate response to albuterol. If there is no definite history of asthma, it is a Base Hospital Physician Order (BHPO). It will be noted at the bottom of the page stating use caution in conditions such as a cardiac history, hypertension or blood pressure higher than 150, or if the patient is older than 40.

Additional comments were made on multi dose vial epinephrine and the shortage of the preload vials, and wording clarification with regards to spinal immobilization.

VIII. ITEMS FOR FUTURE DISCUSSION

There were no items brought forward.

IX. SET NEXT MEETING/ADJOURNMENT

The next meeting will be June 19, 2012, 11:00 a.m., Spectrum Auditorium, 8695 Spectrum Center Court, Kearny Mesa area, San Diego, CA 92101.

The meeting was adjourned at 12:05 p.m.